ICHD - ENVIRONMENTAL HEALTH DIVISION

Statesville Office (704) 878-5305 Mooresville Office (704) 660-3625

PERMIT # OSWP-2022-8204

SEPTIC: IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM

PIN # 4746-41-1990

APPLICANT / OWNER: Piedmont Environmental | APPLICANT ADDRESS: 216 s swing rd suite 1, Greensboro, NC 27409

SITE ADDRESS: 475 TURNERSBURG HWY, STATESVILLE, NC 28625 | PHONE: (336) 215-8820 | ALT. PHONE:

SITE DIRECTIONS: I-40 to Hwy 21 Site on left. | SAP CONTROLLED: YES ☐ NO ☒

SUBDIVISION: Roger E Moore & JJ Holland. | SECTION: | LOT #: 14 | LOT AREA: 50 *300 | DESIGN FLOW: 240 | L.T.A.R.: .275

Septic Tank: (gal) 1000	STB:	Date:	☒ New System ☐ Repair ☐ Expansion	System Type: III.	☒ Residence	No. Bedrooms: 2	Water Supply: Municipal Water
Pump Tank: (gal) 1000	PT:	Date:	System Description: H PP B PS - 50%. Reductio		☐ Business	No. Persons: 4	
Pump Make:	Model:	Serial #:	Repair System Description: HPPBPS-50%. Reductio		☐ Other	No. Employees: 0	
# Nitrification Fields: 1	# Lines: 4	Linear Ft.: 148	Maintenance Agreement Required: ☐ YES ☒ NO		☐ Slab	☒ Crawl Space	
Trench Width: 36 in	Trench Bottom Depth (from grade): 20 in		Gravel Depth: —	☐ GRAVITY ☒ PRESSURE	☐ Basement w/ Plumbing	☐ Basement w/o Plumbing	

Comments / Conditions:

INITIAL SITE SKETCH

This permit is issued pursuant to G.S. 130A-335(a2), (a3) & (a4) using the signed and sealed LSS/LG Evaluation attached here, from:

Piedmont Environmental Associates PA.

LSS# 1284

AS BUILT SKETCH

Checked
Lines BW
Tanks BW
Electrical MW
Alarm MW
Pressure Head MW
12/12/24

Permit can be suspended or revoked if any false information is supplied toward securing the permit / any unauthorized changes are made to the site / any unauthorized changes are made in the installation of the system. CONTACT A LOCATOR SERVICE PRIOR TO ANY EXCAVATION

☐ IMPROVEMENT PERMIT with plat valid without expiration. ☒ IMPROVEMENT PERMIT with site plan valid for 60 mos. ☒ AUTHORIZATION TO CONSTRUCT valid for period equal to IMPROVEMENT PERMIT--not to exceed 60 mo.

Owner / Applicant Signature: [signature] Date:

Installed By: Craig Thompson

IMPROVEMENT PERMIT by: [signature] Date: 1-9-2023

OPERATION PERMIT by: [signature] Date: 12/12/24

AUTHORIZATION TO CONSTRUCT by: [signature] Date: 1-9-2023

Existing System Inspected By: Date:

FOR SEPTIC FINAL INSPECTION CALL: 704-664-3703 BETWEEN 8am-9am the day the inspection is needed.

County: Iredell

This Section for Local Health Department Use Only

Initial submittal received: 12/22/22 (Date) by BB (Initials)

Permit Number: OSWP-2022-820d.

G.S. 130A-335(a4) states the following: *'If a local health department fails to act on an application for an improvement permit submitted pursuant to subsection (a3) of the section within 10 business days of receipt of a complete application, the local health department shall issue the improvement permit.'*

In accordance with G.S. 130A-335(a3) the improvement permit application is:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing:

Copies of this were sent to the LSS and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☐ Denied (See attached report.)

Copies of this were sent to the LSS and the Owner on _____ (Date)

State Authorized Agent: _____ Date: _____

☑ Complete

State Authorized Agent: Benjamin A. Bost Date of Issuance: 1-9-2023.

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2), (a3), and (a4) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 1-9-2028

See attached site sketch

PIEDMONT
ENVIRONMENTAL
ASSOCIATES, P.A.

October 28, 2022, REV
12/22/22

Project # 3488

SL 2022-11 SB 372

Client:

Carolina Land Acquisitions
7021 Albert Pick Rd. Ste B
Greensboro, NC 27409

Site: **NC DOT Project U-5799, Parcel 96**

475 Turnersburg Hwy.

Statesville, NC 28625

Iredell County, NC

Prepared by:

G. Christopher Murray

James L. Beeson

NC Licensed Soil Scientist # 1284

NC Onsite Wastewater Evaluator # 10008E

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PIEDMONT
ENVIRONMENTAL
ASSOCIATES, P.A.

10/28/2022 Project # 2823

Iredell County Environmental Health Dept.

To whom it may concern,

In accordance with Session Law 2022-11 (S372) Section 5.(a), this statement is submitted respectfully to satisfy signed and dated statement requirement from the property owner or owner's legal representative:

"The LSS evaluation attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3)."

"The plans or evaluations attached to this application are to be used to issue a Construction Authorization in accordance with G.S. 130A-335(a2), (a5) and (a6)."

Sincerely,

James L Beeson

James L. Beeson

216 S. Swing Rd., Suite 1 Greensboro, NC 27409 (336) 662-5487

Permit Parameters and Conditions

- Design flow with residential systems utilizes the number of bedrooms and assumes no more than two residents per bedroom at 60 gallons per resident or 120 gallons per bedroom. This is how the design flow of 360 gallons per day is calculated. The wastewater system is designed to handle a maximum flow of 360 gallons per day. This flow should not be maintained for any sustained length of time or oversaturation can occur in the trenches. An average daily water usage of 50% is recommended for peak performance.
- No garbage disposals should be added to the wastewater stream.
- Water softener waste should not be added to the wastewater stream.
- Fats, oils and greases or FOG should not be added to the wastewater stream and can cause premature failure. Dispose of fats, oils, greases and garbage properly in household waste.
- There should be no traffic over the wastewater system area.
- Piedmont Environmental recommends a preconstruction conference prior to any installation to ensure that the system is placed in the correct area once the site is cleared of vegetation.
- Please note that mechanical clearing that is done in wet conditions or done by someone not following best management practices can render an otherwise usable site unsuitable.
- Piedmont Environmental Associates, PA highly recommends using a reputable septic system installer that is licensed in North Carolina to perform or oversee any clearing.
- All installation work shall be performed by a licensed Wastewater System Installer
- Do not install during wet conditions
- Pump tank every three to five years
- Landscape promptly to obtain a good grass cover to prevent erosion over new part of system

Disclaimer

This report discusses the general location of potentially usable soils for on-site wastewater disposal and the soil and site limitations on the property that exists at the time of the evaluation. Piedmont Environmental Associates, PA ("Piedmont") provides professional consulting specializing in the practice of soil science and wastewater management. Piedmont is therefore hired for its professional opinion regarding these matters. This report is being prepared as part of a packet to obtain an improvement permit SL2022-11 and GS 130A-335 and GS 130A-336. Piedmont Environmental Associates provides no warranty either written or implied regarding the lifespan of any type of septic system. Piedmont Environmental Associates utilizes accepted soil science practices and assigns LTAR's and proposes trench depths based on field observation, law, rule, published data and accepted practice of the profession. Piedmont Environmental Associates however cannot guarantee the life span of any type of septic system component, trench media, pretreatment device, distribution device, distribution method, or installation method as there are simply too many variables that are not within the control of Piedmont Environmental Associates.

If you have any further questions, please feel free to call. Thank you for the opportunity to serve.

Sincerely,



G. Christopher Murray
NC Licensed Soil Scientist
Piedmont Environmental Associates, P.A.

"The LSS Evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2)."

.1950 Location of Sanitary Sewage Systems

(c) Every sanitary sewage treatment and disposal system shall be located at least the minimum horizontal distance from the following:

(1) Any private water supply source including a well or spring 100 feet
(2) Any public water supply source 100 feet
(3) Streams classified as WS-I 100 feet
(4) Water classified as S.A. 100 feet
from mean high water mark
(5) Other coastal waters 50 feet
from mean high water mark
(6) Any other stream, canal, marsh, or other surface waters 50 feet
(7) Any Class I or Class II reservoir 100 feet
from normal pool elevation
(8) Any permanent storm water retention pond 50 feet
from flood pool elevation
(9) Any other lake or pond 50 feet
from normal pool elevation
(10) Any building foundation 5 feet
(11) Any basement 15 feet
(12) Any property line 10 feet
(13) Top of slope of embankments or cuts of 2 feet or more
vertical height 15 feet
(14) Any water line 10 feet
(15) Drainage systems:
(A) Interceptor drains, foundation drains and storm water diversions
(i) upslope 10 feet
(ii) sideslope 15 feet
(iii) downslope 25 feet
(B) Groundwater lowering ditched and devices 25 feet
(16) any swimming pool 15 feet
(17) any other nitrification field (except repair area) 20 feet

(b) Ground absorption, sewage treatment and disposal systems may be located closer than 100 feet from a private well supply, except springs and uncased wells located downslope and used as a source of drinking water, repairs, space limitations and other site-planning considerations but shall be located the maximum feasible distance and, in no case, less than 50 feet.

(c) Nitrification fields and repair areas shall not be located under paved areas or areas subject to vehicular traffic. If effluent is to be conveyed under areas subject to vehicular traffic, ductile iron or its equivalent pipe shall be used. However, pipe specified in Rule .1955 (e) may be used if a minimum of 30 inches of compacted cover is provided over the pipe.

Note: Systems over 3000 GPD or an individual nitrification fields with a capacity of 1500 GPD or more have more restrictive setback requirements, see .1950 (a) (17) (d) for specifics.

County: Iredell

IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 4746-41-1992 (Parcel 96)

Issued To: Carolina Land Acquisitions

Property Location: 475 Turnersburg Hwy. Statesville, NC

Subdivision: n/a Lot #: _____ Block: _____ Section: _____

LSS Report Provided: Yes ☑ No ☐

If yes, name and license number of LSS: G. Christopher Murray #1284

New ☐ Repair ☑ Expansion ☐ System Relocation ☑

Proposed Structure: 2-bedroom single family dwelling

Proposed Wastewater System Type: Conventional (Initial) Conventional (Repair)

Fill System: ☐ Yes ☑ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area please provide a fill plan)

Proposed Design Daily Flow: 240 GPD Proposed LTAR (Initial): 0.275 Proposed LTAR (Repair): 0.275

Design Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Number of bedrooms: 2 Number of Occupants: 2 Other: _____

Pump Required: ☑ Yes ☐ No ☐ May be required based upon final location and elevations of facilities

Artificial Drainage Required: ☐ Yes ☑ No If yes, please specify details: _____

Type of Water Supply: ☐ Private well ☐ Public well ☑ Municipal Supply ☐ Spring ☐ Other: _____

Drainfield location meets requirements of Rule .1945: Yes ☑ No ☐

Drainfield location meets requirements of Rule .1950: Yes ☑ No ☐

Permit valid for: ☑ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

see attached documents

Licensed Soil Scientist Print Name: G. Christopher Murray

Licensed Soil Scientist Signature: _____ Date: 10/28/22

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

See attached site sketch

County: Iredell

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 4746-41-1992 (Parcel 96)

Issued To: Carolina Land Acquisitions

Property Location: 475 Turnersburg Hwy. Statesville, NC

AOWE/PE Plans/Evaluations Provided: Yes ☑ No ☐ If yes, name and license number of AOWE/PE: James L. Beeson #10008E

Facility Type: 2-bedroom single family dwelling

☐ New ☐ Expansion ☑ Repair ☑ System Relocation

Basement? ☐ Yes ☐ No Basement Fixtures? ☐ Yes ☐ No

Type of Wastewater System** Conventional (Horizontal PPBPS) (Initial) Conventional (Horizontal PPBPS) (Repair)

Design Daily Flow: 240 GPD Wastewater Strength: ☑ domestic ☐ high strength ☐ industrial process

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? ☐ Yes ☑ No

Installation Requirements/Conditions

Septic Tank Size: 900 gallons Total Trench/Bed Length: 148 feet Trench/Bed Spacing: 9 feet on center

Drainfield square footage: 1026 Trench/Bed Width: 3 inches LTAR: 0.275 gpd/ft²

Soil Cover: 6 inches Slope Adjusted Maximum Trench/Bed Depth: 20 inches

Aggregate Depth: n/a inches above pipe n/a inches below pipe n/a inches total

Pump Tank Size (if applicable): 900 gallons Requires more than 1 pump? ☐ Yes ☑ No

Pump Requirements: 14.6 ft. TDH vs. 21.9 GPM Grease Trap Size (if applicable): _____ gallons

Distribution Method: ☐ Serial ☐ D-Box or Parallel ☑ Pressure Manifold(s) ☐ LPP ☐ Other: _____

Artificial Drainage Required: Yes ☐ No ☑ If yes, please specify details: _____

Legal Agreements *(If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)*

Multi-party Agreement Required [.1937(h)]: ☐ Yes ☑ No

Easement, Right-of-Way, or Encroachment Agreement Required [.1938(j)]: ☐ Yes ☑ No

Declaration of Restrictive Covenants: ☐ Yes ☑ No

****If applicable:**

I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Print Name: James L Beeson

Owner/Legal Representative Signature: James L Beeson Date: 10/28/22

Pre-Construction Conference Required: Yes ☐ No ☑

Conditions: _____

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

AOWE/PE Print Name: James L Beeson

AOWE/PE Signature: James L Beeson Date: 10/27/22

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

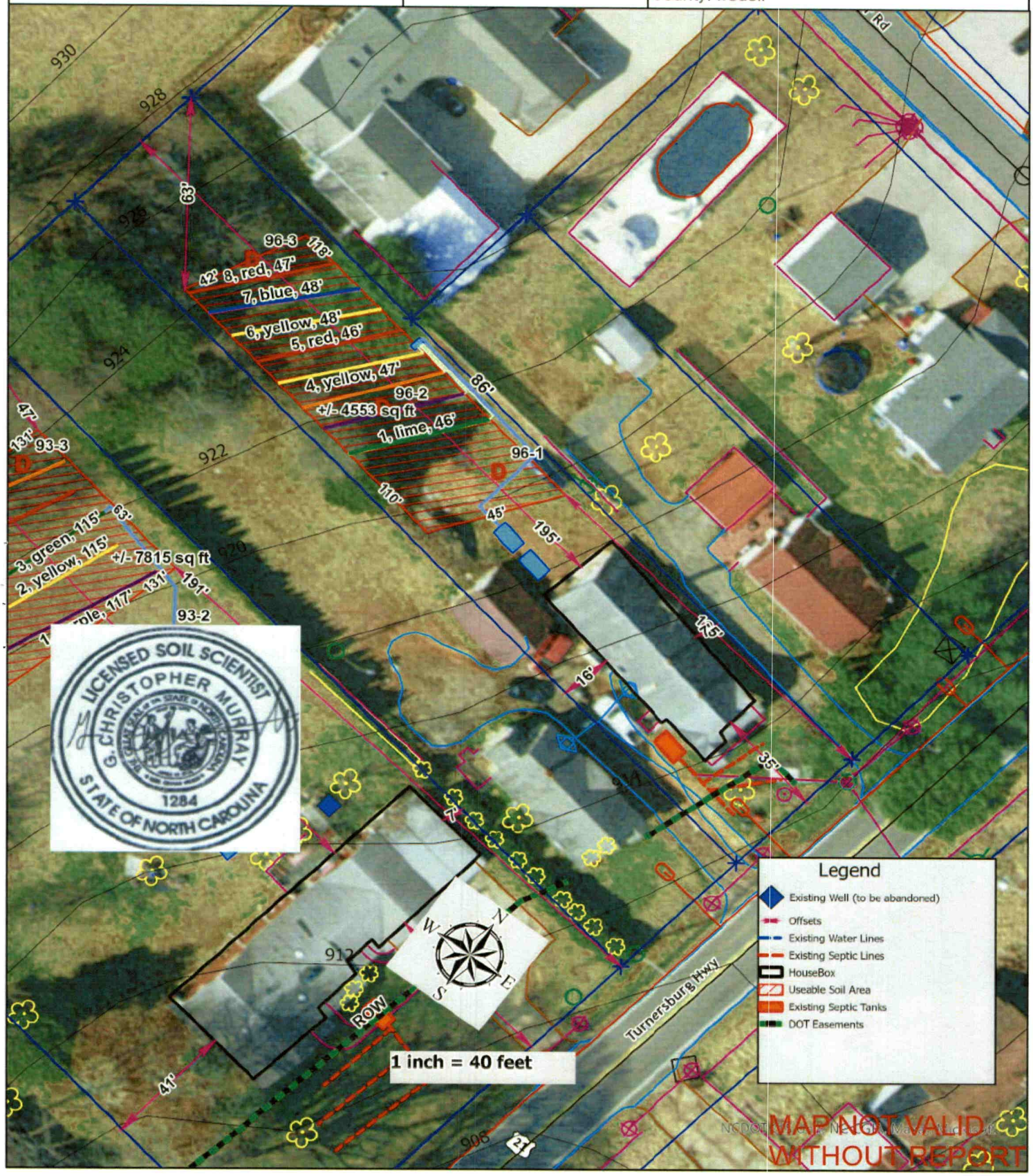
See attached site sketch

PIEDMONT ENVIRONMENTAL ASSOCIATES, P.A.

NC DOT Project U-5799, Parcel 96 Septic Map (PH 2)

216 S. Swing Rd. Suite 1
Greensboro, NC 27409
piedmontsoil.com

Job# 3488
Date: 10/28/22
Client: NC DOT/Carolina Land
County: Iredell



Client: Carolina Land Acquisitions
Lot Number: 96
Parcel#: 4746411992
DATE: 9/29/2022
LSS: Chris Murray
Eval Method: Auger
Facility/Flow: 4 BR/480 GPD

Site Classification: PS
Initial System: PPBPS
Initial System LTAR: 0.3
Repair System: PPBPS
Repair System LTAR: 0.3
Others Present:
Water Supply: Municipal

PIEDMONT ENVIRONMENTAL ASSOCIATES, P.A.

Number	UsableDep	LTAR	Boring Type	Horizon1	Horizon2	Horizon3	Landscape	Slope
96-1	38	0.3	Conv	A 0-5 sl 2mgr fr ns np	Bt 6-36 c 2msbk fi s p		Ss	5
96-2	38	0.3	Conv	A 0-5 sl 2mgr fr s p	Bt 6-34 c 2msbk fi s p	BC 35-48 cl 2msbk fi s p	Ss	5
96-3	48	0.3	Conv	A 0-5 sl 2mgr fr ns np	Bt 6-48 cl 2msbk fi s p		Ss	4

Notes: Soil Wetness - Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - Record Munsell color chip designation.
Classification - S - Suitable, PS - Provisionally Suitable, U - Unsuitable
LTAR - Long Term Acceptance Rate
Landscape Position: SU - summit, SH - shoulder, BS - backslope, FS - footslope, TS - toeslope, SS - sideslope, HS - headslope
Mineralogy: SE - slightly expansive, EXP - expansive

Septic System Layout Specifications

U-5799, Parcel 96 - Iredell County, NC

Piedmont Environmental Associates Job # 3488

Layout for a 2-BR home

LINE #	FLAG COLOR		FLAGGED LINE LENGTH (ft)	DESIGN LINE LENGTH (ft)
1	**lime**		**46**	**37**
2	**purple**		**46**	**37**
3	**orange**		**46**	**37**
4	**yellow**		**47**	**37**
5	red		46	37
6	yellow		48	37
7	blue		48	37
8	red		47	37
		Total	**374**	**296**

	DESIGN LINE LENGTH (ft)	SOIL LTAR GPD/FT^2	SYSTEM TYPE	DESIGN LTAR GPD/FT^2	DISTRIBUTION MEDIA	DISTRIBUTION METHOD	DESIGN FLOW (GPD)
System	**148**	**0.275**	**Conventional**	**0.275**	**PPBPS (horiz.)**	**Pressure Manifold**	**240**
Repair	148	0.275	Conventional	0.275	PPBPS (horiz.)	Pressure Manifold	240

Notes: **All measures in feet.

**Nitrification lines are demonstrated on contour via colored pin flags.

**BS, FS indicate rod readings.

Primary System, Pressure Manifold Tap Sheet

U-5799, Parcel 96 - Iredell County, NC
Piedmont Environmental Associates Job # 3488
SYSTEM TAP CHART

Line #	Color	Field Elev. (ft)	Length (ft)	Hole Size (in)	Flow/Tap (gpm)	gpd	Trench Area (sq ft)	Line LTAR (gpd/sq ft)
1	lime	*102.60*	37	SCH 80 1/2	5.48	60.00	111	0.541
2	purple	*101.50*	37	SCH 80 1/2	5.48	60.00	111	0.541
3	orange	*99.90*	37	SCH 80 1/2	5.48	60.00	111	0.541
4	yellow	*99.10*	37	SCH 80 1/2	5.48	60.00	111	0.541

total **feet =** 148 **gal/min =** 21.92

Des. Flow	240	gpd
Pump Run=	10.95	min
soil LTAR	0.275	gpd/sq ft
(ltar +5%)	0.28875	gpd/sq ft
INNOV. Product Reduction	50%	
LTAR with INNOV.	0.55	gpd/sq ft
LTAR with INNOV. + 5%	0.578	gpd/sq ft
100% Dose Volume	96.31	gal
Percent Dose Volume	75%	
Total	72.23	gal
Pump Run Time	3.30	min

Primary System, Pressure Manifold Design Calculations

U-5799, Parcel 96 - Iredell County, NC
Piedmont Environmental Associates Job # 3488
DESIGN CALCULATIONS

Supply line length	86	ft
2.00 in. SCH 40 PVC	0.174	gal/ft
Supply line Volume	*14.964*	*gal*
Total drain field length	148	ft
4"pipe	0.65079	gal/ft
Total drain field volume	96.32	gal
Percent of dose volume	75%	
Dose Volume	*72.2*	*gal*
Dose volume	72.2	gal
Pump tank	19.65	gal/in
Pump tank Drawdown	*3.7*	*in*
Ground Elevation at Pump Tank	919	ft
Pump Tank Installation Depth	1	ft
Pump Tank Elevation	918.0	ft
Pump Elev. Difference	5	ft
Pump Elevation	913.0	ft
Elevation of Highest Drain Line	923.0	ft
Manifold Elevation	924.0	ft
	11.0	ft
Elevation Head	*11.0*	*ft*
System flow	21.92	gal/minute
Friction Factor*	1.00	*f* /100ft
Supply Line Length	86	ft
Friction Adjustment for Fittings**	156	ft
Friction Head	*1.6*	*ft*
Pressure Head	*2.0*	*ft*
(TDH) Total Dynamic Head	*14.6*	*ft*
Daily flow	240	gal/day
LTAR	0.275	sqft/day
Trench width	3	ft
Required drain field length (PPBPS)	*290*	*ft*

* Computed by Hazen Williams Formula, assuming *C* =140

**If supply line is greater than 350ft, then 20% is added to account for fittings. If supply line is less than 350ft, then 70ft is added to account for fittings.

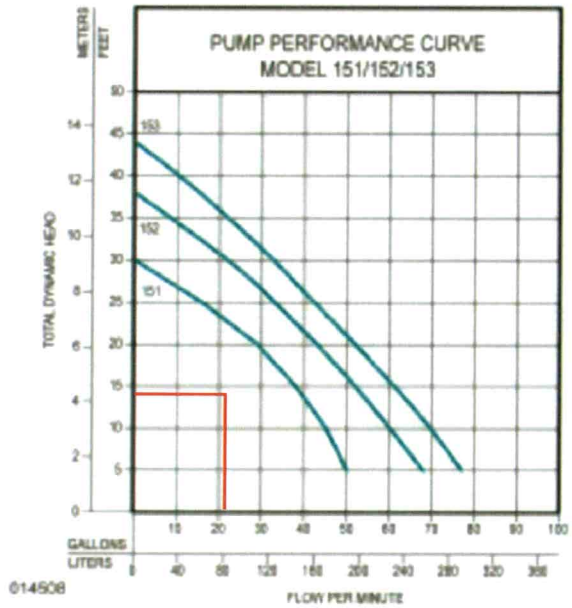
Primary System, Pressure Manifold Information

U-5799, Parcel 96 - Iredell County, NC
Piedmont Environmental Associates Job # 3488
PRESSURE MANIFOLD SYSTEM
FOR WASTEWATER TREATMENT

Applicant:	Carolina Land Acquisitions
County:	Iredell
Source of Wastewater Flow:	Residence
Estimated Daily Wastewater Production:	240 gpd
System Flow:	21.9 gpm

Design Specifications

Number of Drain Lines:	4
Drainfield Size:	148 ft
Loading Rate:	0.275 gpd/sq ft
Distribution Media:	PPBPS (horiz.)
Gravel Size (if applicable):	n/a
Trench Depth:	20"
Trench Width:	3 ft
Septic Tank:	900 gal
Pump Tank:	900 gal
Grease Trap:	NA -
Estimated Supply Line Length:	290 ft
Supply Line Diameter:	2.0 in. SCH 40 PVC
Supply Line Volume:	14.96 gal
Supply Manifold:	4.0 in. SCH 80 PVC
Supply Manifold Length:	3.5 ft (minimum)
Supply Manifold Volume:	0.6 gal
Threaded Union:	In Tank
Gate Valves:	1 in Pump Tank
	1 at Pressure Manifold
Check Valves:	1 in Pump Tank
Anti-Siphon Hole:	1 in Pump Tank
Solenoid Valve:	NA
Air Release/Vacuum Break Valve:	NA



Recommended Float Controls:	SJE Sensor Float Control Switches as Required for Control Panel or County Approved Equivalent
Recommended Control Panel:	SJE-Rhombus Model 112 (NEMA 4x) Control Panel or County Approved Control Panel.
Recommended Pump:	Zoeller Model 151 or Approved Equiv.
TDH Capacity:	14.6 ft
Flow Capacity:	21.9 gpm

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 6/8/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Valerie Leonard	
Younts Insurance Agency Inc 121 N Talbert Blvd Lexington NC 27292	PHONE (A/C, No, Ext): 336-238-1053	FAX (A/C, No): 336-238-1054
	E-MAIL ADDRESS: valerie@yountsinsurance.com	

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Continental Casualty Company	2186
INSURER B : Penn National Mutual Casualty Insurance Company	14990
INSURER C : Ohio Casualty Insurance Company	24074
INSURER D :	
INSURER E :	
INSURER F :	

INSURED PIEDENV-02
Piedmont Environmental Associates, PA
216-1 S. Swing Road
Greensboro NC 27409

COVERAGES **CERTIFICATE NUMBER:** 582131835 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY			BP9 0741038	6/1/2022	6/1/2023	EACH OCCURRENCE	$ 2,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300,000
							MED EXP (Any one person)	$ 10,000
							PERSONAL & ADV INJURY	$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 4,000,000
	POLICY X PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 4,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY			AU90741038	6/1/2022	6/1/2023	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY / X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
	X 19						Medical Payments	$ 2,000
B	X UMBRELLA LIAB OCCUR			UL9 0741038	6/1/2022	6/1/2023	EACH OCCURRENCE	$ 1,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 1,000,000
	DED X RETENTION $ 0							$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N			XWO55203240	6/1/2022	6/1/2023	X PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
A	Professional Liability			EEH288330253	6/1/2022	6/1/2023	Each Claim Aggregate Deductible	2,000,000 2,000,000 5,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

*****FOR CLIENT PURPOSES ONLY*****

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Diana Evans

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